| SCC eFile                                                                                                             | 2013 ANNUAL REPORT 213562763 COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION  |         |                                |                                      |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------|--------------------------------|--------------------------------------|
| 1.) CORPORATION NAME:                                                                                                 |                                                                                     |         | DUE DATE:                      | 12/31/2013                           |
| Tidewater Community College Alumni Association,Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ROBERT C NUSBAUM |                                                                                     |         | SCC ID NO:                     |                                      |
| 999 WATERSIDE DRIVE<br>SUITE 1700                                                                                     |                                                                                     |         | 5.) STOCK I                    | NFORMATION<br>AUTHORIZED             |
| NORFOLK, VA                                                                                                           |                                                                                     |         |                                |                                      |
| 3.) CITY OR COUNTY OF VA REC<br>NORFOLK CITY                                                                          | GISTERED OFFICE:                                                                    |         |                                |                                      |
| 4.) STATE OR COUNTRY OF INC <b>VA</b>                                                                                 | ORPORATION:                                                                         |         |                                |                                      |
| 6.) PRINCIPAL OFFICE ADDRESS                                                                                          | 3:                                                                                  |         |                                |                                      |
| ADDRESS: 121 CC                                                                                                       | DLLEGE PLACE                                                                        |         |                                |                                      |
| CITY/ST/ZIP: NOR                                                                                                      | FOLK, VA 23510                                                                      |         |                                |                                      |
| 7.) DIRECTORS AND PRINCIPAL                                                                                           |                                                                                     |         | officers must that director ar | pe listed. An individual an officer. |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:                                                                        | GERALD A ORTIZ<br>PRESIDENT<br>206 HUNTER GREEN COURT<br>CHESAPEAKE, VA 23320       | X OFFIC | ER                             | X DIRECTOR                           |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:                                                                        | TERRI L KWASNY<br>SECRETARY<br>THREE COMMERCIAL PLACE<br>NORFOLK, VA 23510          | X OFFIC | ER                             | X DIRECTOR                           |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:                                                                        | SULAIMAN BAH<br>DIRECTOR<br>12748 Perchance Terrace<br>Woodbridge, VA 22192         | OFFIC   | ER                             | X DIRECTOR                           |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:                                                                        | GARRETT G BERGER<br>VICE PRESIDENT<br>4838 Ashbury lane<br>Virginia Beach, VA 23462 | X OFFIC | ER                             | X DIRECTOR                           |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:                                                                        | Susan M James<br>TREASURER<br>121 College Place<br>Norfolk, VA 23510                | X OFFIC | ER                             | X DIRECTOR                           |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:                                                                        | Jane M Bennett<br>DIRECTOR<br>105 West Arden Circle<br>Norfolk, VA 23505            | OFFIC   | ER                             | X DIRECTOR                           |

| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI<br>NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI | P/CO: Corpus Christi, T<br>Wanda J Cooper<br>DIRECTOR<br>2636 Highland Me | X 78418  | OFFICER | X DIRECTOR  X DIRECTOR |
|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------|----------|---------|------------------------|
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              | 00: 10: <u>L</u> : III                                                    | 48       |         |                        |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              |                                                                           |          | OFFICER | X DIRECTOR             |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              | Apartment 712                                                             |          | OFFICER | x DIRECTOR             |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              | 2000 Oronara Lai                                                          |          | OFFICER | X DIRECTOR             |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              | one cann coonge                                                           | e Court  | OFFICER | x DIRECTOR             |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              | 0.2 0000000                                                               |          | OFFICER | X DIRECTOR             |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              |                                                                           | 'A 23464 | OFFICER | X DIRECTOR             |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              | 0000 110011 010011                                                        |          | OFFICER | X DIRECTOR             |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZI                                              | 000 0.4                                                                   | et       | OFFICER | X DIRECTOR             |

|                                                                                                                                     |                                                 | OFFICER | χ DIRECTOR |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------|------------|--|--|--|
| NAME:                                                                                                                               | Bruce J Meyer                                   |         |            |  |  |  |
| TITLE:                                                                                                                              | DIRECTOR                                        |         |            |  |  |  |
| ADDRESS:                                                                                                                            | 582 Lynnhaven Parkway<br>Suite 202              |         |            |  |  |  |
| CITY/ST/ZIP/CO:                                                                                                                     | Virginia Beach, VA 23452                        |         |            |  |  |  |
|                                                                                                                                     |                                                 | OFFICER | χ DIRECTOR |  |  |  |
| NAME:                                                                                                                               | Donna S Morris                                  |         |            |  |  |  |
| TITLE:                                                                                                                              | DIRECTOR                                        |         |            |  |  |  |
| ADDRESS:<br>CITY/ST/ZIP/CO:                                                                                                         | 207 87th Street                                 |         |            |  |  |  |
| 0111/01/211/00:                                                                                                                     | Virginia Beach, VA 23451                        | OFFICER | DIDECTOR   |  |  |  |
| NAME:                                                                                                                               | Kula Daraingar                                  | OFFICER | X DIRECTOR |  |  |  |
| TITLE:                                                                                                                              | Kyle Persinger DIRECTOR                         |         |            |  |  |  |
| ADDRESS:                                                                                                                            | 208 Peachwood Lane                              |         |            |  |  |  |
| CITY/ST/ZIP/CO:                                                                                                                     | Virginia Beach, VA 23452                        |         |            |  |  |  |
|                                                                                                                                     |                                                 | OFFICER | χ DIRECTOR |  |  |  |
| NAME:                                                                                                                               | Lucynthia J Rawls                               |         |            |  |  |  |
| TITLE: ADDRESS:                                                                                                                     | DIRECTOR                                        |         |            |  |  |  |
| CITY/ST/ZIP/CO:                                                                                                                     | 1208 General Street<br>Virginia Beach, VA 23464 |         |            |  |  |  |
| 011170172117001                                                                                                                     | Vilgilia Beach, VA 25404                        | OFFICER | DIDECTOR   |  |  |  |
| NAME:                                                                                                                               | Kinii B Bidlov                                  | OFFICER | X DIRECTOR |  |  |  |
| TITLE:                                                                                                                              | Kinji R Ridley<br>DIRECTOR                      |         |            |  |  |  |
| ADDRESS:                                                                                                                            | 2700 H Townhouse Lane                           |         |            |  |  |  |
| CITY/ST/ZIP/CO:                                                                                                                     | Chesapeake, VT 23323                            |         |            |  |  |  |
|                                                                                                                                     |                                                 | OFFICER | χ DIRECTOR |  |  |  |
| NAME:                                                                                                                               | Corrine R Stewart                               |         |            |  |  |  |
| TITLE:                                                                                                                              | DIRECTOR                                        |         |            |  |  |  |
| ADDRESS:<br>CITY/ST/ZIP/CO:                                                                                                         | 14 Blacksmythe Lane<br>Newport News, VA 23602   |         |            |  |  |  |
| 01117017211700.                                                                                                                     | Newport News, VA 20002                          | OFFICER | DIRECTOR   |  |  |  |
| NAME:                                                                                                                               | David C Sullivan                                | OFFICER | X DIRECTOR |  |  |  |
| TITLE:                                                                                                                              | David C Sullivan DIRECTOR                       |         |            |  |  |  |
| ADDRESS:                                                                                                                            | 5525 Hatteras Road                              |         |            |  |  |  |
| CITY/ST/ZIP/CO:                                                                                                                     | Virginia Beach, VA 23462                        |         |            |  |  |  |
|                                                                                                                                     |                                                 | OFFICER | χ DIRECTOR |  |  |  |
| NAME:                                                                                                                               | Jennifer L Walker                               |         |            |  |  |  |
| TITLE:                                                                                                                              | DIRECTOR                                        |         |            |  |  |  |
| ADDRESS:                                                                                                                            | 1410 Villa Capri Circle<br>#308                 |         |            |  |  |  |
| CITY/ST/ZIP/CO:                                                                                                                     | Odessa, FL 33556                                |         |            |  |  |  |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND                                                   |                                                 |         |            |  |  |  |
| COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.                                                 |                                                 |         |            |  |  |  |
| /s/ GERALD A ORTIZ                                                                                                                  | GERALD A ORTIZ, PRE                             | SIDENT  | 12/31/2013 |  |  |  |
| SIGNATURE OF DIRECTOR/OFFICER PRINTED NAME AND CORPORATE DATE LISTED IN THIS REPORT TITLE                                           |                                                 |         |            |  |  |  |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material |                                                 |         |            |  |  |  |

respect with the intent that the document be delivered to the Commission for filing.